

**Counsel Certification Form  
Dispute Resolution Services**

DOCKET NO. \_\_\_\_\_

**Trial Court of Massachusetts  
Juvenile Court Department**



DIVISION \_\_\_\_\_

**CASE NAME:** \_\_\_\_\_

**COUNSEL CERTIFICATION FORM**

I am attorney-of-record for: \_\_\_\_\_  
petitioner/respondent in the above-entitled matter.

In accordance with Rule 5 of the Supreme Judicial Court Rules on Dispute Resolution (SJC Rule 1:18) which states in part:

**"...Attorney shall provide clients with this information about court-connected dispute resolution services; discuss with their clients the advantages and disadvantages of the various methods of dispute resolution; and certify their compliance with this requirement on the civil cover sheet or its equivalent",**

I hereby certify that I have complied with this requirement.

\_\_\_\_\_  
Signature of Attorney-of-Record

\_\_\_\_\_  
Print Name

B.B.O. # \_\_\_\_\_

Date: \_\_\_\_\_

**INSTRUCTIONS:**

All counsel of record shall file this document in accordance with Juvenile Court Rules.

**Care and Protection Cases:** This document shall be filed before or with the filing of the pre-trial conference memorandum.